

**Ryan White Part A Program
Serving the Middlesex, Somerset, Hunterdon
Transitional Grant Area**

**Standards of Care for
Health Insurance Premium & Cost Sharing Assistance
Ryan White HIV/AIDS Treatment Extension Act of 2009**

Approved on November 14, 2017

Prepared by

**Service Standards and Integrated Care Plan Committee of the
Middlesex-Hunterdon-Somerset HIV Health Services Planning Council**

HRSA Service Definition

Health Insurance Premium and Cost Sharing Assistance provides financial assistance for eligible clients living with HIV to maintain continuity of health insurance or to receive medical and pharmacy benefits under a health care coverage program. For purposes of this service category, health insurance also includes standalone dental insurance.

The service provision consists of the following:

- Paying health insurance premiums to provide comprehensive HIV Outpatient/Ambulatory Health Services, and pharmacy benefits that provide a full range of HIV medications for eligible clients; and/or
- Paying standalone dental insurance premiums to provide comprehensive oral health care services for eligible clients; and/or
- Paying cost sharing on behalf of the client.

TGA specific addendum; consumers need to utilize state sponsored ADDP/HIPP programs for pharmacy benefits and health insurance premiums. Consumers will receive assistance to cover insurance outpatient medical care co-payments (medical visits). Consumers will receive assistance to cover co-insurance for medical tests and procedures.

Ryan White HIV/AIDS Program Part recipient must implement a methodology that incorporates the following requirements:

- RWHAP Part recipients must assess and compare the aggregate cost of paying for the health coverage option versus paying for the aggregate full cost for medications and other appropriate HIV outpatient/ambulatory health services, and allocate funding to Health Insurance Premium and Cost Sharing Assistance only when determined to be cost effective.
- RWHAP Part recipients must ensure that clients are buying health coverage that, at a minimum, includes at least one drug in each class of core antiretroviral therapeutics from the Department of Health and Human Services (HHS) treatment guidelines along with the appropriate HIV outpatient/ambulatory health services

Agency Service Standards

(Health Insurance Premium & Cost Sharing Assistance)

Table 1. Agency Related Issues			
Policy Number	Activity/Issue	Minimum Acceptable Threshold of Service	Accountability Mechanism
1.1	Definition of Services	Agency has description of services on file.	100% of agencies will define services they provide.
1.2	Licensure	Agency has current licenses on file from appropriate licensing agency.	100% of agencies are licensed and accredited by appropriate state or federal agencies.
1.3	Hours of Operation	Agency has documentation of operating hours on file.	Staff is available to answer incoming calls during agency's normal operating hours. If client calls within operating hours, staff will respond within one business day or the first business day after a weekend or holiday.
1.4	Emergency Services	Agency has policy on file outlining emergency service procedures related to the service they provide.	100% of agencies will have policies in place to handle emergencies/crises that occur outside of normal operating hours.
1.5	Special Service Needs	Agency complies with Americans Disabilities Act (ADA).	100% of agencies have policies to respond to special needs clients.
1.6	Cultural/Linguistic Diversity	Agency has written policy on file including process for language translation.	100% of agencies have policies in place for responding to cultural and linguistic diversity (including translation services).
1.7	Consumer Referrals	Agency has written referral policy on file. Agency uses CAREWare internal referral process. Agency will link completed referral in Careware	100% of agencies will have a referral process for care of HIV related problems outside of their direct service area.
1.8	Linkage Agreements	Agency has written policy on file for establishing linkage agreements and record of linkage agreements on file.	100% of agencies will develop and maintain linkages with primary health care, support and other service providers.
1.9	Provider Communication	Agency has written policies on file that allow for communication between different programs.	100% of providers have a written communications policy regarding patient care (HRSA funded services and others.)

Table 1. Agency Related Issues			
Policy Number	Activity/Issue	Minimum Acceptable Threshold of Service	Accountability Mechanism
		Documentation of consent is required	
1.10	Provider Collaboration	Provider agencies are part of a care and treatment network and are required to collaborate on behalf of the client.	100% of provider agencies show proof of collaboration across Ryan White and other provider networks during the duration a client is receiving the service.
1.11	Policies and Procedures	Agency has written staff policies on file.	<p>100% of agencies have written policies for staff which include (but are not limited to):</p> <ul style="list-style-type: none"> • Agency policy and procedures • Agency has a description of the Ryan White Treatment Extension Act of 2009 • Standards of professional behavior • Compliance with the Health Insurance Portability and Accountability Act [PL 104-191] • Client confidentiality • Release of information • Communication about agency issues • Health and safety procedures including universal precautions • Complaint and grievance procedures
1.12	Grievance Policy	Agency has grievance policy on file and available to clients.	100% of agencies have grievance policies and procedures available to clients.
1.13	Staff Evaluation	Agencies have procedures in place to evaluate staff.	<p>100% of agencies have evaluation procedures on file.</p> <p>100% of agency staff has a working knowledge of evaluation procedures.</p> <p>100% of agency staff receive an annual performance evaluation</p>

Table 1. Agency Related Issues			
Policy Number	Activity/Issue	Minimum Acceptable Threshold of Service	Accountability Mechanism
1.14	Quality Management	Agencies have procedures in place to evaluate the quality and effectiveness of health insurance premium & cost sharing assistance services on an ongoing basis.	100% of agency have written procedures on file to evaluate health insurance premium & cost sharing assistance services. Agency participates fully in TGA Quality Management activities including data and chart review processes.
1.15	CAREWare Data Collection	Monthly reports are sent to grantee and are available on request. CAREWare is used to ensure data is collected in a uniform manner	100% of agencies regularly update client information, needs assessment, client progress and care and client referrals and other services provided. 100% of agencies regularly share monthly reports with grantee.
1.16	Planning Council Attendance	Agency representative must attend monthly Planning Council meetings.	Agency must attend 75% of monthly Planning Council meetings.

Staff Service Standards

(Health Insurance Premium & Cost Sharing Assistance)

Table 2. Staff Related Issues			
Policy Number	Activity/Issue	Minimum Acceptable Threshold of Service	Accountability Mechanism
2.1	Staff Hiring	All staff will have necessary skills and experience determined by: <ul style="list-style-type: none"> • Written application • Resume • References • Personal interview 	Application, resume, and communication with personal references are documented in personnel files.
2.2	Staff Qualifications	All staff have a diploma, certificate or license (if appropriate) or experience documented in personnel file	100% of staff possesses a diploma, certificate or license (if appropriate) or experience documented in personnel file
2.2 (a)	Staff Qualifications Peer Navigator	A member of the peer community living with HIV/AIDS with a high school diploma or GED, plus two years of social service experience. Peer must demonstrate understanding of HIV services and healthcare service navigation.	100% of staff possesses a diploma/GED with the required experience documented in personnel file
2.3	Staff Job Descriptions	All staff will be given a written job description. The job description includes definition of health insurance premium & cost sharing assistance services	100% of staff has job description documented in personnel file.
2.4	Staff Training	All staff are trained and knowledgeable on: <ul style="list-style-type: none"> • HIV/AIDS and the affected community including disease process, co-morbidities and psychosocial effects of the disease. • Cultural sensitivity. • Entitlement programs, benefits to clients, and community resources/support services • Client confidentiality, client rights, agency grievance procedures 	100% of personnel files document training.
2.5	Staff Continuing Education	All staff has the opportunity to take advantage of continuing education training that is available and appropriate.	100% of personnel files document training.

Table 2. Staff Related Issues			
Policy Number	Activity/Issue	Minimum Acceptable Threshold of Service	Accountability Mechanism
		Staff attends at least one in-service or specialized training a year on topics related to their position.	
2.6	Staff Supervision	<p>All supervisors are knowledgeable about RW HIV health insurance premium & cost sharing assistance services and procedures including fiscal and program</p> <p>All staff will receive (at minimum) one hour supervision per week to develop skills</p>	<p>100% of supervisors are knowledgeable about RW program.</p> <p>Supervision is documented in personnel file</p>
2.6 (a)	Staff Supervision Peer Navigator	All peer navigators will receive (at minimum) one hour supervision per week to include patient case conference, peer navigator job performance, and skill development.	Supervision is documented in personnel file.
2.7	Policies and Procedures	Signed form is documented in personnel file.	100% of staff agree to follow agency policies and procedures.
2.8	Staff Evaluation	Staff evaluations are documented in personnel files.	100% of staff are evaluated on their performance annually.
2.9	Documentation	All staff will keep written documents of contact with clients in accordance with RW data collection procedures	100% of all contacts are documented in client files.

Client Service Standards

(Health Insurance Premium & Cost Sharing Assistance)

Table 3. Client Related Issues			
Policy Number	Activity/Issue	Standard of Care Minimum Acceptable Threshold of Service	Accountability Mechanism
3.1	Client Eligibility	<p>In order to be eligible for services, individuals must meet the following:</p> <ul style="list-style-type: none"> • HIV positive • Residing or receiving services in the Middlesex, Somerset, Hunterdon TGA • Income no greater than 500% of the Federal Poverty Level. • To receive premium cost-sharing reductions, individuals must receive a premium tax credit and enroll in one of the Affordable Care Act plans, ADDP and HIPP 	90% of clients have documentation of HIV positive status, residence, and income.
3.2	Client Assessment	<p>Conduct an evaluation and assessment to determine the needs</p> <p>The assessment will identify:</p> <ul style="list-style-type: none"> • Review of all other potential sources of assistance • Copay cost • Client income and expenses 	90% of client files include an assessment to determine needs
3.3	Reassessment	The client's eligibility for co-payment assistance will be reviewed at least once every six months.	90% of client files have documentation of copayment assistance review.
3.4	Referrals	Referrals to other resources are provided as needed	90% of client files have documentation of referrals to resources provided